KDELL

12/01/2014

## **FCC 388**

## DTV Consumer Education Quarterly Activity Report

#### Instructions

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This form should be used to provide the Federal Communications Commission (FCC) with information pertaining to <u>all</u> station activity to educate consumers on the transition to digital television (DTV). All stations should log DTV Transition-Related Public Service Announcements (PSAs) and other DTV activities using the appropriate house (identification) numbers. These logs or records should include the date and time that each DTV activity occurred. This form must be filed in Docket Number 07-148 as Document Type: REPORT, and placed in the station's Public Inspection File. This form must continue to be filed for each quarter in which a station has DTV Transition education obligations.

- Go to the ECFS upload page: http://fjallfoss.fcc.gov/prod/ecfs/upload v2.cgi
- Fill out the relevant cover sheet information.

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- In the "Send Comment Files to FCC (Attachments)" section click the "Browse" button to choose the file you want to attach.
   (Or the first file if you have multiple files to attach)
- Click on the "Select one of these file types or convert your file to one of these types:" dropdown to choose the type of file
  that was attached.
- Click "Send Attached File to FCC"
- If you only had one file to attach click "Finish Transaction and Receive Confirmation".
- If you have another file to attach, click on the "Enter Additional Attachments"

Station Call Sign	(S)					NDEH		
Report reflects in	formation	for quarter 6	ending (mm/dd/yy	)		03/31/08		
Have you opted to	o comply	with Option C	One, Two, or Three	e (once elected, this cl	noice may not	change)?		
○ Option	One (A a	nd D)	Option T	(Wo (B and D)	☐ Opt	ion Three (C and	d D)	
	No	r Analog chan ] No If	nel and your prima	quirements of this op ry Digital stream? aly one form for both. d for your primary Dig	If <b>NO</b> , complet	e a form for your	Analog	
Call Sign	Chann	el Numbers			Community of License			
				City	State	County	Zîp Code	
KBEH	Analo <sub>i</sub> Digita			Camarillo	CA	Ventura	93012	
Licensee Bela T	V, LLC							
Above, circle the Change Channel 63 and Chan		) to which this for	m applies.	Nielsen DMA Los Angeles		Vide Web Home Page	Address	
Facility ID Number	Facility ID Number Previous Call Sign (if applicable)				License Renewal Expiration Date (mm/dd/yy)			

## Section A (For broadcasters electing Option One)

Stations that elect Option One must place a copy of this form on the station's public website, if such exists.

On its analog channel, and its primary digital stream, a station must air one transition PSA, and run one transition crawl, in every quarter of every day. This requirement will increase to two PSAs and crawls per quarter per day on April 1, 2008, and to three of each on October 1, 2008. Stations are required to air PSAs or crawls at various times in any given day part, and at least one PSA and one crawl per day must be run during primetime hours. On-air education must not contain inaccurate or misleading statements and must be provided in the same language as a majority of the programming carried by the station. PSAs must be at least 15 seconds, and closed-captioned. Crawls must run during programming for no fewer than 60 consecutive seconds across the bottom or top of the viewing area (See rules for additional details).

ave you aired a sufficient number of eligible PSAs (28, 56, or 84 per week, depending on the reporting period) during the prect quarters of the day?	2
⊠ Yes □ No	
ave you aired a sufficient number of eligible crawls (28, 56, or 84 per week, depending on the reporting period) during the prect quarters of the day?	2
☐ Yes ☐ No	

### Section B (For broadcasters electing Option Two)

On its analog channel, and its primary digital stream, a station must run an average of 16 transition-related PSAs and 16 transition-related crawls, snipes, and/or tickers per week in each quarter, all between the hours of 5 a.m. and 1 a.m.. It must also run one 30 minute DTV-related informational program once, and one 100-Day Countdown piece per day for the 100 days prior to the conclusion of the transition. Comment boxes MUST be used to describe these compliant activities (See rules for additional details).

## Total Number of Eligible DTV Transition-Related PSAs and Crawls, Snipes, and/or Tickers (CSTs) Run -- Last Quarter

How many DTV PSAs and CSTs did your station run between 5:0	0 a.m. and 1:00 a.m. last quarter?
Total 5:00 a.m. to 1:00 a.m. PSAs	
Total 5:00 a.m. to 1:00 a.m. CSTs	
For informational purposes only, how many DTV PSAs and CS a.m.?	Ts did your station run in the last quarter from 6:00 a.m. to 9:00
Total 6:00 a.m. to 9:00 a.m. PSAs	
Total 6:00 a.m. to 9:00 a.m. CSTs	
For stations located in the Eastern or Pacific Time Zone, how man from 6:00 p.m. to 11:35 p.m. (must average at least 4 per week)?	y DTV PSAs and CSTs did your station run in the last quarter
Total 6:00 p.m. to 11:35 p.m. PSAs	
Total 6:00 p.m. to 11:35 p.m. CSTs	
For stations located in the Central or Mountain Time Zone, how m from 5:00 p.m. to 10:35 p.m.(must average at least 4 per week)?	any DTV PSAs and CSTs did your station run in the last quarter
Total 5:00 p.m. to 10:35 p.m. PSAs	
Total 5:00 p.m. to 10:35 p.m. CSTs	
Comments (add additional sheets where necessary):	

## 30 Minute Educational Programs - Last Quarter

How many 30 minute, DTV-related informational programs did be run between the hours of 8:00 a.m. and 11:35 p.m., prior to F	I your station run during the quarter? At least one such program must ebruary 17, 2009.
Total number of 30 Minute Informational Programs	
Comments (add additional sheets where necessary):	
100-Day Countdown Eligible Pieces – Last Quarter	
activities. Stations must execute a minimum of one "Countdov	Option Two will engage in special 100-Day "Countdown to DTV" vn to DTV" on-air activity per day during the 100 days leading up to ligible 100-Day "Countdown to DTV" pieces did your station run?
Graphic Displays	
Animated Graphics	
Graphic and Audio Displ	lays
Longer Form Reminders	
Comments (add additional sheets where necessary):	

### Section C (For Noncommercial broadcasters only)

On its analog channel, and its primary digital stream, a station must air 60 seconds per day of on-air consumer education, in variable timeslots, including at least 7.5 minutes per month between 6 pm and 12 am. Beginning May 1, 2008, this requirement doubles, and beginning November 1, 2008, it increases again, to 180 seconds per day and 22.5 minutes per month between 6 pm and midnight. It must also run one 30 minute transition education piece once (See rules for additional details).

Have you aired a sufficient amount of consumer education (60, 120, or 180 seconds per day, depending on the date) during each day

this quarte		Sume	then amount of consumer education (60, 120, or 180 seconds per day, depending on the date) during each day
	Yes		No
30 Minute	Educ	ationa	al Programs – Last Quarter
			DTV-related informational programs did your station run during the quarter? The comment box may be used to At least one such program must be run between the hours of 8:00 a.m. and 11:35 p.m., prior to February 17,
Total num	ber of	30 Mi	nute Informational Programs
Comments	(add	additio	onal sheets where necessary):

# Section D (For all broadcasters)

Additi	ona	H D I	V On-	air initi	iatives – Last	Quarter
					l on-air initiati initiatives.	tives (such as news reports, town hall meetings, etc.) during the quarter? The comment be
	3	Yes		No		Comments (add additional sheets where necessary):
Station	n W	ebsite	e Addi	tional A	Activity Relate	ted to the DTV Transition - Last Quarter
Does y	our	statio	n have	a Web	site?	
					de additional D he station's Wo	DTV related information or activities on that Website? The comment box may be used to /ebsite.
	]	Yes		No		Comments (add additional sheets where necessary): "Get Tuned In" website campaign with additional information for viewers. Link is posted on main web page.
	all d	of the	DTV 1	elated a	fforts Last	Quarter  d below that your station engaged in over the last quarter. The comment box may be used
	Sp	eakin	g Enga	gement	S	Comments (add additional sheets where necessary):
	Со	mmui	nity Ev	ents/		Comments (add additional sheets where necessary):
	Ot	her (d	escribe	e)		Comments (add additional sheets where necessary):
This co		nent b	ox ma	ıy be us	sed to include	e other comments or information about your station's DTV activity over the last
N. Fred		(add	additic	onal shee	ets where nece	essary):

#### STATION CERTIFICATION

I certify that the statements in this document are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Typed or Printed Name of Person Signing	Typed or Printed Title of Person Signing	
Robert Behar	Robert Behar	
Signature	Date	
× / Jun Blu	04/08/08	

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/CR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

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